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Return of Organization Exempt From Income Tax

OMB No 1545-0047 2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Form **990**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990 and its instructions is at www.irs.gov/form990.

A	For the	2014 calendar year, or tax year beginning , 2014, and end	ing		, 20
В	Check if a	pplicable C Name of organization Indiana Mineral Aggregates Association, Inc.		D Employ	er identification number
	Address of	change Doing business as		35	- 0410458
	Name cha	Number and street (or P.O box if mail is not delivered to street address) Room/s	surte	E Telepho	ne number
$\overline{}$	Initial retu	44744 N. Callana Ava	180	317	- 580-9100
		City or town, state or province, country, and ZIP or foreign postal code			
二	Amended	4 101 4000		G Gross re	eceipts \$ 986,701
_		on pending F Name and address of principal officer Robert Jones	H(a) is this a c		subordinates? Yes No
	присавс	Same as C above	1 ''	•	s included? Yes No
_	Тах-ехел				a list. (see instructions)
	Website:			exemption	
_		ganization			of legal domicile IN
_	art I	Summary	ation 1341	W State	or regar dornicite 114
				a ladiaa	- Minaral Aggregates
_		Briefly describe the organization's mission or most significant activities: The			
Activities & Governance		Association is to solve common problems of the Indiana aggregate produ			
Ë		mine safety/ reclamation, pollution, legislation, research, increased public			
Ž	1	Check this box ► if the organization discontinued its operations or disposed	of more than	1 .	I
Ğ	1	Number of voting members of the governing body (Part VI, line 1a)		3	15
ග		Number of independent voting members of the governing body (Part VI, line 1b)		14
iţe	1	Total number of individuals employed in calendar year 2014 (Part V, line 2a)			4
₹	1	Total number of volunteers (estimate if necessary)		6	206
ĕ		Total unrelated business revenue from Part-VIII column (C), line 12		7a	3,900
	b	Net unrelated business taxable income from Form 990 1 Vine 39	<u> </u>	7b	0
)	Prior Y	ear	Current Year
٥	8	Contributions and grants (Part VIII, line 📆 . 🚻		169,468	166,614
Revenue	9	Program service revenue (Part VIII, line) AUG 1 9 2015.		666,461	716,308
	10	Investment income (Part VIII, column (A), lines.3, 4, and 7d)		20,937	48,187
Œ	11	Other revenue (Part VIII, column (A), lines 5, 60 (60, 90, 10c, and 1e)		25,299	28,031
		Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	882,165	959,140	
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		166,000	159,000
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0	0
s	1	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	-	289,304	305,003
Expenses	1	Professional fundraising fees (Part IX, column (A), line 11e)		0	0
Pe	l .	Total fundraising expenses (Part IX, column (D), line 25) ▶ 0			
ă		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		343,447	393,211
	l .	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)		798,751	857,214
	l .	Revenue less expenses. Subtract line 18 from line 12		83,414	101,926
- 2		TOTOTICO COS CAPOTOCO. COSTIGOTO ITOTOTOTOTO IL C	Beginning of Co		End of Year
et Assets or ind Balances	20	Total assets (Part X, line 16)		970,242	1,047,300
Asse	21	Total liabilities (Part X, line 26)		129,381	104,513
¥.5	22	Net assets or fund balances. Subtract line 21 from line 20		840,861	942,787
_	art II	Signature Block	·	040,001	342,707
		. •	tomonto and to	the heat of	my knowledge, and helpf it in
		ies of perjury, I declare that I have examined this return, including accompanying schedules and sta and complete. Declaration of preparer (other than officer) is based on all information of which prepai			my knowledge and belief, it is
	-	NA G G			12-15
Sig	·n	Signature of officer	D:	ate	12-13
He		Robert G. Jones	0.	ate	
110	. 0				
		Type or print name and title Print/Type preparer's name Preparer's signature	Date		PTIN
Pa	id			Check	[⊻] ɪf
Pr	epare	The sale of the	3/12/15	self-em	pioyea
	e Only	Firm's name ► Stephen R. (Neifgen	Fire	n's EIN ▶	
		Firm's address ► 920 E. Northview Ave., Indpls IN 46220	Pho	one no 3	17 - 250-9687
Ма	y the IR	S discuss this return with the preparer shown above? (see instructions)			Yes No

For Paperwork Reduction Act Notice, see the separate instructions.

Form **990** (2014)

Form 990	0 (2014)	Page 2
Part I	Statement of Program Service Accomp	ishments
		or note to any line in this Part III
1	Briefly describe the organization's mission:	
		elopment and use of all minerals. To disseminate information
		g, use and sale of aggregates. To promote general welfare
	of the members of the assocation and the ind	ustry.
2	Did the organization undertake any significant pro	ogram services during the year which were not listed on the
-	prior Form 990 or 990-EZ?	
	If "Yes," describe these new services on Schedule	The Transfer of the Transfer o
		ke significant changes in how it conducts, any program
	services?	· · · · · · · · · · · · · · · · · · ·
	If "Yes," describe these changes on Schedule O.	Tes Miles
	_	omplishments for each of its three largest program services, as measured by
		ations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each p	
4a	(Code:) (Expenses \$ 0 I	ncluding grants of \$ 0) (Revenue \$ 0)
		is is an annual event for members to be updated on issues
		nd educational opportunities, in some cases offering CEU's.
	*	······································
		-
4b	(Code:) (Expenses \$ 0 i	ncluding grants of \$0 (Revenue \$)
	Environmental Stewardship Council-This is a	n ongoing year-long function of the association. The purpose is to
	provide a self-regulated reclamation program	for the industry.
		·····
4c		ncluding grants of \$0 (Revenue \$)
		actvitities of the Public Information and Education committee, which
		eachers; also includes a summer meeting to update members
	and provide educational opportunities, and s	afety training.

		······································
		······
4,4	Other program condens (Describe to Octob 1. C.)	
4d	Other program services (Describe in Schedule O.)	
-40	(Expenses \$ 0 including grants of \$	
	Total program service expenses ▶	

Form **990** (2014)

Part	V Checklist of Required Schedules			-3
·			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A			1
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	-
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I			
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)	3		✓
_	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	<u> </u>	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	•	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	6_	<u> </u>	✓
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	8		1
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		\ _
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		1
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			_ V .
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	/	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		1
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		1
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		1
12 a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.	12b		1
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	i	√
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		,
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV			1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	15		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	16		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	17		✓
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?	18	✓	
20 a	If "Yes," complete Schedule G, Part III	19		1
∠∪a b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		V

Part	Checklist of Required Schedules (continued)			
•			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	1	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	✓	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		✓.
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d 25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	24d 25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		\
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		→
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a 28b		√
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		y
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	29		√ ✓
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		√
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		√
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		√
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		√
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		√
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R</i> ,			
	Part VI	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	1	
			222	

Part	V Statements Regarding Other IRS Filings and Tax Compliance	-		
	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>		
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 5			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		İ
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 4			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	√	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	✓	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	✓	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	ا ـ ـ		,
ь	accounty?	4a		V
D	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
	(FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1
ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			١.
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		✓
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	O.L		
7	gifts were not tax deductible?	6b		<u> </u>
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	İ		
	and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		ļ
d	If "Yes," indicate the number of Forms 8282 filed during the year	-		
e f	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7e 7f		-
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	-	
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
_ b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	-	
10 a	Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1		
11	Section 501(c)(12) organizations. Enter:	1		
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	ļ	
b 12	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	{		
13	Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state?	13a		
а	Note. See the instructions for additional information the organization must report on Schedule O.	138	 	
b	Enter the amount of reserves the organization is required to maintain by the states in which			
	the organization is licensed to issue qualified health plans]		
C	Enter the amount of reserves on hand	1	<u></u>	<u> </u>
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		√
h	If "Yes." has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule O	14h	1	1

Part	response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. Schedule O	ee ins	tructi	ons.
Section	Check if Schedule O contains a response or note to any line in this Part VI	· · ·		<u> </u>
Secu	on A. Governing body and Management		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
ь 2	Enter the number of voting members included in line 1a, above, who are independent . 1b 14 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		✓
3	Did the organization delegate control over management duties customanly performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3	ļ	1
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders?	4 5 6		✓ ✓ ✓
ь	one or more members of the governing body?	7a		✓
8	stockholders, or persons other than the governing body?	7b		✓
a b	The governing body?	8a 8b	1	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		1
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Revenue	Je Co		
40-	Duddha awaa'astaa haya laad ahaataa haaabaa ayaffilataa0	40-	Yes	No
10a b	Did the organization have local chapters, branches, or affiliates?	10a 10b		<u> </u>
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		1
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a 12b	√	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	✓	
13 14	Did the organization have a written whistleblower policy?	13 14	√	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a b	The organization's CEO, Executive Director, or top management official	15a 15b	✓	1
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		1
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Secti	on C. Disclosure			
17 18	List the states with which a copy of this Form 990 is required to be filed ▶ Indiana Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	501(c)(3)s	only)
19	Own website Another's website I Upon request Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of integranding statements available to the public during the tax year.	erest	policy	y, and
20	State the name, address, and telephone number of the person who possesses the organization's books and rec	cords	: >	

Part VII	Compensation of Officers,	Directors, Trustees	, Key Employees,	Highest Cor	mpensated Em	nployees,	and
	Independent Contractors						
	Check if Schedule O contains	a response or note to	any line in this Part	: VII			

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

☐ Check this box if neither the organization	ation nor any relate	d orga	aniz			ompe	nsa	ted any currer	nt officer, director	r, or trustee.
(A) Name and Title	(B) Average hours per week (list any	box,	unles	Pos neck s pe d a d	rson	e than o	ı ал tee)	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
-	hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Jeff Kneis	1.0							0	0	0
Director	.0	✓	_	ļ			┡			
(2) Jordan Caldwell	1.0			ŀ	ļ			0	0	0
Director	1.0	✓				-	-		 	
(3) Nathan Wanstrath Director	.0	,						0	0	0
(4) Jeff Brown	1.0	-	\vdash				╁			
Director	.0	1		ł				0	0	0
(5) Paul Tate	1.0	-		_	-	-	1	 	-	
Director	.0	1						0	0	0
(6) Greg Gould	1.0			\vdash	\vdash				1	
Director	.0	1						0	0	0
(7) Dave Olmstead	1.0	-						 		
Director	.0	1						0	0	0
(8) Joe Schlabach	1.0							_		
Director	.0	✓						0	0	0
(9) Dennis Garrison	1.0									
Secretary	.0			✓				0	0	0
(10) Kevin Sheehan	1.0							0	0	0
Immediate Past President	.0			✓				L		
(11) Andy Williams	1.0							0	0	
President	.0			✓				0	U	0
(12) Jim Rancilio	1.0							0	0	^
President Elect	.0	L		1			L	0	•	0
(13) Gus Diehr	1.0							0	0	
Treasurer	.0			✓		L				0
(14) Steve Crane	1.0					1		0	0	0
Vice President	.0	L		V						

Part	(A) Name and title	(B) Average	box, ı	ot che	Pos eck s pe	rson	than o	an	(D) Reportable compensation	(E) Reportab		Est	(F) mated	
		week (list any hours for related organizations below dotted line)	Individua or directo		Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizati (W-2/1099-N	ons	comp fro orga and	ther ensation m the nization related nization	n İ
	obert Jones xecutive Director	40.0			1	1	\		152,392		0		21,	545
(16)		.0			•		·							-
(17)		.0												
(18)		.0		+				-			+			
(19)		.0				ļ								
		.0							ł					
(20)		.0 .0												
(21)		.0								-				·
(22)		.0						-				•		
(23)		.0												
		.0												
(24)		.0												
(25)		.0												
	Sub-total			•			•	>	152,392		0		21,	545
c d	Total from continuation sheets to Part Total (add lines 1b and 1c)	-		•	•			>	152,392		0		21	0 545
2	Total number of individuals (including but reportable compensation from the organi						above	e) w		ore than \$1		of	21,	545
			· <u>·</u> ···										Yes	No
3	Did the organization list any former of employee on line 1a? If "Yes," complete 3									est compe	nsated 	3		1
4	For any individual listed on line 1a, is the organization and related organizations individual	sum of rep	oortal	ole c	om	npei	nsatio	n a	ind other comp				,	
5	Did any person listed on line 1a receive of for services rendered to the organization									ation or inc		5	/	
Section	on B. Independent Contractors	, , , ,	p.						Jaon porcon	· · · · ·	· · ·	1.3	L	
1	Complete this table for your five highest compensation from the organization. Repyear.													ax
	(A) Name and business add	ress							(B) Description of s	ervices		(C) Compens	ation	
2	Total number of independent contractor	rs (includir	ng bu	t no	ot I	imit	ed to	th	nose listed abo	ove) who				

Form **990** (2014)

Par	VIII	Statement of Rever						
		Check if Schedule O	contains a re	sponse or note to			<u></u>	<u></u>
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ats ats	1a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts	b	Membership dues .		166,614		ŀ		
λ, C	С	Fundraising events .	<u>1c</u>	<u> </u>		1		
Gif Fa	d	Related organizations	<u>1d</u>					
ž, i	е	Government grants (conti			į	1		
er Si	f	All other contributions, gift						
혈美		and similar amounts not inclu						
<u>a</u> <u>a</u>	9	Noncash contributions include	· · · · · · · · · · · · · · · · · · ·			1		
	<u>h</u>	Total. Add lines 1a-1f			166,614			
죑				Business Code				
eve	2a				712,408	712,408		
æ	Ь			541800	3,900		3,900	
ξ	С							
Š	d			ļ				
ran	e	All address are arranged and a						
Program Service Revenue	f g	All other program servi Total. Add lines 2a–2f		•	716,308	L	<u> </u>	
	3	Investment income (i	ncluding divi	dends interest	7 10,300		 ···· ·	
	"	and other similar amou	-		44,037	44.037		
	4	Income from investment	•	L	44,037	44,037		
	5	Royalties	•	· · · · · · · · · · · · · · · · · · ·		+		· · · · · · · · · · · · · · · · · · ·
	-	,	(ı) Real	(ii) Personal		•		
	6a	Gross rents						
	ь	Less rental expenses						
	С	Rental income or (loss)			ĺ	ì		
	d	Net rental income or (kg	oss)	•				
	7a	Gross amount from sales of	(i) Securities	(II) Other				
		assets other than inventory	_	4,150				
	b	Less cost or other basis						
		and sales expenses .				i		
	С	Gain or (loss)	-	4,150				
	d	Net gain or (loss) .		▶	4,150	4,150		
evenue	8a	Gross income from fur	ndraising					
eVe		events (not including \$	d an IIn - d - \					
Œ		of contributions reported See Part IV, line 18	•		ţ			
Other R	_	•	`	55,592				
Ö		Less: direct expenses Net income or (loss) fro		27,561 events	20 024	}		20.024
		Gross income from gan		g events .	28,031			28,031
	34	See Part IV, line 19 .			1			
	h	Less: direct expenses		5	İ	ļ		
		Net income or (loss) from			1		•	
		Gross sales of inv						· · · · · · · · · · · · · · · · · · ·
	""	returns and allowances						
	ь	Less: cost of goods so		6				
	c	Net income or (loss) fro		·		1	İ	
	<u> </u>	Miscellaneous Re		Business Code		· · · · · · · · · · · · · · · · · · ·		
	11a			 	o			
	b					·		· · · · -
	С					<u> </u>		
	d	All other revenue .						
	е	Total. Add lines 11a-1		▶	0			
	12	Total revenue. See ins	structions	▶	959,140	760.595	3,900	28.031

Part IX Statement of Functional Expenses

Section	n 501(c)(3) and 501(c)(4) organizations must com				
	Check if Schedule O contains a respons				
Do no 8b, 9b	of include amounts reported on lines 6b, 7b, b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	159,000	159,000		
2	Grants and other assistance to domestic individuals. See Part IV, line 22		:	·	
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	172,545	172,545		
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	100,885	100,885		
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	3,051	3,051		
9	Other employee benefits [8,821	8,821		
10	Payroll taxes	19,701	19,701		
11	Fees for services (non-employees):				
а	Management				
b	Legal	00.400			
С	Accounting	20,429	20,429		
d	Lobbying				-
e	Professional fundraising services. See Part IV, line 17	7 264	7 264		
f g	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column	7,261	7,261		
9	(A) amount, list line 11g expenses on Schedule O.)	1,838	1,838		
12	Advertising and promotion	745	745		†
13	Office expenses	25,386	25,386		
14	Information technology	5,754	5,754		
15	Royalties			· ·	
16	Occupancy	25,069	25,069		
17	Travel	34,716	34,716		
18	Payments of travel or entertainment expenses				·
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,157	2,157		-
20	Interest				
21 22	Payments to affiliates	8,243	8,243		-
23	Insurance	10,838	10,838		
24	Other expenses. Itemize expenses not covered	10,000	10,000		<u> </u>
24	above (List miscellaneous expenses in line 24e. If				
	line 24e amount exceeds 10% of line 25, column				
	(A) amount, list line 24e expenses on Schedule O.)				
a					
b					
C					
d					
е	All other expenses	250,775	250,775		
25	Total functional expenses. Add lines 1 through 24e	857,214	857,214	0	0
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs				
	from a combined educational campaign and				-
	fundraising solicitation. Check here if following SOP 98-2 (ASC 958-720) if if if if if if if i				

Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (A) (B) Beginning of year End of year 91,202 1 1 85,291 2 152,785 2 171,372 3 Pledges and grants receivable, net 3 32,948 4 36,532 4 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 Assets 7 Notes and loans receivable, net 8 Inventories for sale or use 13.026 8 7.445 9 Prepaid expenses and deferred charges . . . 12.420 13,107 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 10b Less: accumulated depreciation 56,887 23,029 10c 52.675 Investments—publicly traded securities 644.832 11 11 680,878 Investments-other securities. See Part IV, line 11 . 12 12 13 13 Investments—program-related. See Part IV, line 11... 14 14 15 15 970,242 1,047,300 16 Total assets. Add lines 1 through 15 (must equal line 34) 16 29,556 5,413 17 17 Accounts payable and accrued expenses 18 18 99,825 99,100 19 19 20 Tax-exempt bond liabilities 20 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D. Loans and other payables to current and former officers, directors, 22 trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties . . 24 Other liabilities (including federal income tax, payables to related third 25 parties, and other liabilities not included on lines 17-24). Complete Part X 25 Total liabilities. Add lines 17 through 25 129,381 26 104.513 Organizations that follow SFAS 117 (ASC 958), check here ▶

✓ and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. 27 840,861 27 942,787 28 28 Permanently restricted net assets 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 Paid-in or capital surplus, or land, building, or equipment fund . . . 31 31 32 32 Retained earnings, endowment, accumulated income, or other funds. 942,787 840.861 33 33 Total liabilities and net assets/fund balances . 970.242 1,047,300 34 34

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гони	330	120141	

Page 12

Par	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI		·		
1	Total revenue (must equal Part VIII, column (A), line 12)	1		959,	140
2	Total expenses (must equal Part IX, column (A), line 25)	2		857,	214
3	Revenue less expenses. Subtract line 2 from line 1	3		101,	926
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		840,	861
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		942,	787
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII			<u> </u>	
				Yes	No
1	Accounting method used to prepare the Form 990: 🗌 Cash 📝 Accrual 🔲 Other		_		
	If the organization changed its method of accounting from a prior year or checked "Other," exp Schedule O.	olain	in		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compreviewed on a separate basis, consolidated basis, or both:				✓
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		ŀ		
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audite separate basis, consolidated basis, or both:	 d on	. 2b		✓.,
С	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for overof the audit, review, or compilation of its financial statements and selection of an independent account	ntant	? 2c		
	If the organization changed either its oversight process or selection process during the tax year, ex Schedule O.	olain	ın		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set the Single Audit Act and OMB Circular A-133?		in . 3a		1
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not underequired audit or audits, explain why in Schedule O and describe any steps taken to undergo such a		ne 🗔		
				m 990	(2014)

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service For Organizations Exempt From Income Tax Onder Section 301(c) and Section 321

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B
- Section 527 organizations: Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

, (0	00 00parato inol 40110110/i, 1				
	ection 501(c)(4), (5), or (6) organization	ınızatıons. Complete Part III		Employer idea	rtification number
	•			1 .	
	Mineral Aggregates Associated	ciation, Inc.			35-0410458
Part		e organization is exempt und the organization's direct and indire			organization.
1 2	•	the organization's direct and indire	•	· .	
3	Volunteer hours			Ψ	
J	volunteer nours				
Part	E3 Complete if the	e organization is exempt und	er section 501(c	c)(3).	
1		excise tax incurred by the organiza			-
2		excise tax incurred by organization			
3		ed a section 4955 tax, did it file For			
4a	Was a correction made?				Yes No
<u> </u>	If "Yes," describe in Part				
Part		e organization is exempt und			(c)(3).
1		ly expended by the filing organiz			
2		filing organization's funds contrib			
_		vities			
3		expenditures. Add lines 1 and 2			
4		file Form 1120-POL for this year			
5		ses and employer identification nui ents. For each organization listed,			
		ents. For each organization listed, ontributions received that were pro			
		fund or a political action committee			
		<u> </u>	I		
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds If none, enter -0-	promptly and directly
					delivered to a separate political organization If
					none, enter -0-
(1)					
					
(2)					
(3)					
			<u> </u>	! 	
(4)		}	1		
				<u> </u>	
(5)			1		
(6)	···· -· -· -· -· -				
(6)			1		

Dogo	2
Page	4

Pa	rt II-A	Complete if the organization section 501(h)).	is exempt	under section 50	01(c)(3) and filed	d Form 5768 (ele	ction under
		if the filing organization beloname, address, EIN, expen	ses, and sha	are of excess lobb	ying expenditur	es).	up member's
В	Check ▶	☐ if the filing organization che			rol" provisions a	ipply.	
	·	Limits on Lobby				(a) Filing	(b) Affiliated
		(The term "expenditures" me		. •		organization's totals	group totals
1		obbying expenditures to influence	•				
		obbying expenditures to influence	•		3)		
		obbying expenditures (add lines 1a	· ·				
		exempt purpose expenditures .					·
		xempt purpose expenditures (add		·			
	f Lobbyi columr	ng nontaxable amount. Enter t ns.	he amount	from the following	table in both		
	If the ar	nount on line 1e, column (a) or (b) is:	The lobbying	nontaxable amount	t is:	,	
	Not ove	r \$500,000	20% of the a	mount on line 1e.			
	Over \$5	00,000 but not over \$1,000,000	\$100,000 plu	s 15% of the excess	over \$500,000.		
	Over \$1	,000,000 but not over \$1,500,000	\$175,000 plu	s 10% of the excess of	over \$1,000,000.		
	Over \$1	,500,000 but not over \$17,000,000	\$225,000 plu	s 5% of the excess or	ver \$1,500,000.		
		7,000,000	\$1,000,000.				
		oots nontaxable amount (enter 25°					
		ct line 1g from line 1a. If zero or le					<u>.</u>
		ct line 1f from line 1c. If zero or les				51 5 4700	
		e is an amount other than zero					☐ Yes ☐ No
	reporti	ng section 4911 tax for this year?					
	(Som	e organizations that made a sec See the	tion 501(h) e separate ins	tructions for lines	e to complete all 2a through 2f.)	of the five column	ns below.
		Lobbying	Expenditure	s During 4-Year Av	veraging Period		
	Cale	endar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total
2	a Lobbyi	ng nontaxable amount					
	•	ng ceiling amount of line 2a, column (e))					
	c Total lo	obbying expenditures					
		oots nontaxable amount					
		oots ceiling amount of line 2d, column (e))					
	f Grassr	oots lobbying expenditures		<u>]</u>			

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT file (election under section 501(h)).	ed l	Form	5768		
For e	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(a)		(b)	
	the first time at the second of the second o	res	No	A	moun	t
1	During the year, did the filing organization attempt to influence foreign, national, state or local					
	legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	-				
C	Media advertisements?					-
_	d Mallings to members, legislators, or the public? e Publications, or published or broadcast statements? f Grants to other organizations for lobbying purposes? g Direct contact with legislators, their staffs, government officials, or a legislative body? h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? i Other activities? j Total. Add lines 1c through 1i 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? b If "Yes," enter the amount of any tax incurred under section 4912 c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filling organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? 2 Did the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of					
				•	•	
i	Other activities?					
j	Total. Add lines 1c through 1i					
2a	taran da antara da antara da antara da antara da antara da antara da antara da antara da antara da antara da a					
b	*					
		<u></u>		otion		
Part		3), C	or se	cuon		
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1		1
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		•	2		1
3	Did the organization agree to carry over lobbying and political expenditures from the prior year? .	<u></u>		3	✓	
	answered "Yes." Dues, assessments and similar amounts from members	.		III-A,		
2	political expenses for which the section 527(f) tax was paid).		_			
a	Current year		2a			5,400
þ	Carryover from last year	.	2b			-2,131
C	Total		2c 3			3,269
3 4	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues. If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying	he	3			7,674
	and political expenditure next year?		4			-2,27
5	Taxable amount of lobbying and political expenditures (see instructions)		5			· <u> , - , - , - , - , - , - , - , - , </u>
Par						
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group e instructions); and Part II-B, line 1. Also, complete this part for any additional information.	o list	t); Par	t II-A, I	ines '	l and

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes" to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization Indiana Mineral Aggregates Association, Inc. 35-0410458 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6, (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (dunng year) . 4 Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Conservation Easements. Part II Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (e.g., recreation or education) Preservation of a historically important land area ☐ Protection of natural habitat Preservation of a certified historic structure ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year a Total number of conservation easements 2a 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the Number of states where property subject to conservation easement is located ▶ 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶\$ R Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

b Assets included in Form 990, Part X .

Part	III Organizations Maintaining	Collections of	Art, Hist	torical 1	reasures,	or Ot	her Similar A	Assets (continued)
	Using the organization's acquisition,							
	collection items (check all that apply):			•	,		J	J
а	☐ Public exhibition		A 1	□ Loan	or exchang	e progr	ame	
b	Scholarly research							
		_	e	Other	'			
C	Preservation for future generations		and avale	in hourt	har from have	tha are	ani-ation's av	ammt nurnasa in Da
4	Provide a description of the organiza XIII.	tion's collections	and expla	un now t	ney turtner	trie org	anization's ex	empt purpose in Pa
5	During the year, did the organization	solicit or receive	donation	s of art,	historical tre	easures	s, or other sim	nilar
	assets to be sold to raise funds rather	r than to be mainta	ained as p	part of the	e organizatio	on's co	flection? .	. 🔲 Yes 🗌 No
Part	IV Escrow and Custodial Arra	angements.						
	Complete if the organization		" to Forr	n 990. F	Part IV, line	9. or r	eported an a	mount on Form
	990, Part X, line 21.			•		•	•	
1a	Is the organization an agent, trustee	, custodian or oth	ner interm	nediary fo	or contributi	ions or	other assets	not
	included on Form 990, Part X?							· Tyes No
b	If "Yes," explain the arrangement in P							
	ii 100, explain the artangement iii 1	ar Am and comp	010 1110 10		45.0.		ı	Amount
_	Beginning balance					1c	+	
C C	Additions during the year					1d		
d	= · · ·					1e	 	······
e	Distributions during the year							
f	Ending balance					1f	<u> </u>	40 D V. DN
2a	Did the organization include an amou							•
	If "Yes," explain the arrangement in P	art XIII. Check hei	re if the ex	(planatio	n has been	provide	d in Part XIII	<u> L</u>
Pari		1 /// /	.					
	Complete if the organization				art IV, line	10.		
		(a) Current year	(b) Pro	ог уеаг	(c) Two year	s back	(d) Three years ba	ack (e) Four years back
1a	Beginning of year balance		<u> </u>					
b	Contributions							
С	Net investment earnings, gains, and		İ		i			
	losses							
d	Grants or scholarships							
e	Other expenditures for facilities and							
	programs					1		
f	Administrative expenses					ĺ		
g	End of year balance			•				
2	Provide the estimated percentage of	the current year e	nd balanc	e (line 1c	, column (a)) held a	as:	
а	Board designated or quasi-endowme			,				
b	Permanent endowment ▶							
C	Temporarily restricted endowment ▶	%						
•	The percentages in lines 2a, 2b, and 2		00%.					
3a	Are there endowment funds not in th	•		zation th	at are held a	and ad	ministered for	the
	organization by:							Yes No
	(i) unrelated organizations							. 3a(i)
	(ii) related organizations							. 3a(ii)
ь	If "Yes" to 3a(ii), are the related organ							. 3b
4	Describe in Part XIII the intended use							. 00
Part			5 5 Oride					
r di			" to Eo~	m 000 F	Dart IV lina	110 9	Saa Form 000	Dart Y line 10
	Complete if the organization							
	Description of property	(a) Cost or o			or other basis other)		Accumulated epreciation	(d) Book value
		(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		ļ <u>"</u>				
1a	Land			<u> </u>			·	· · · · · · · · · · · · · · · · · · ·
b	Buildings	·		ļ				
C	Leasehold improvements	·]						
d	Equipment	·	109,562	ļ			56,887	52,67
е	Other	<u>: </u>		<u> </u>				
Total.	Add lines 1a through 1e. (Column (d) r	nust equal Form 9	990, Part 2	X, columi	n (B), line 10)c.)	🕨 1	

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundralsing or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

▶ Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.urs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Indian	a Mineral Aggregates Association	, Inc.					0410458
Pari	Fundraising Activities	•	-		vered "Yes" to F	orm 990, Part IV,	line 17.
	Form 990-EZ filers are						
1	Indicate whether the organizati	on raised funds			•	• • •	
а	Mail solicitations		e L		ion of non-govern	-	
b	Internet and email solicitation	ons	f		ion of government	-	
C	Phone solicitations		g.⊡] Special 1	fundraising events	3	
d	In-person solicitations						
2 a	Did the organization have a wr						
	or key employees listed in Forr	n 990, Part VII) o	or entity in co	onnection v	with professional f	undraising services	? 🗌 Yes 🗌 No
b	If "Yes," list the ten highest pai compensated at least \$5,000 b			draisers) p	ursuant to agreem	nents under which th	ne fundraiser is to be
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	draiser have r control of outlons?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		1	Yes	No			
1]		
2	-					· · · · · · · · · · · · · · · · · · ·	
3	,		·				
4							
5					•		
6				:		 	
7							
8							
9		 -					
10							
Total				▶			
3	List all states in which the org registration or licensing.	anization is regi	stered or lic	ensed to s	colicit contribution	s or has been notifi	ed it is exempt from
••							
				·			
	·····						
							

Pa	rt II	Fundraising Events. Con than \$15,000 of fundraising gross receipts greater tha	ng event contributions	on answered "Yes" to and gross income on	Form 990, Part IV, line Form 990-EZ, lines 1 a	e 18, or reported more and 6b. List events with
		3	(a) Event #1 Golf Fundraiser (event type)	(b) Event #2 (event type)	(c) Other events	(d) Total events (add col. (a) through col (c))
Revenue	1	Gross receipts	55,591			55,591
	2	Less: Contributions Gross income (line 1 minus line 2)	55,591			55,591
	4	Cash prizes	1,498			1,498
	5	Noncash prizes	2,235			2,235
nses	6	Rent/facility costs	20,640			20,640
Direct Expenses	7	Food and beverages				
Direc	8	Entertainment				
	9	Other direct expenses	3,188		-	3,188
Da	10 11 rt III	Direct expense summary. Ac Net income summary. Subtra Gaming. Complete if the	act line 10 from line 3, c	olumn (d)		27,561 28,030
Le	recent.	than \$15,000 on Form 9		red res to ronn 99	o, rantiv, inters, or	reported more
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>—</u>	1	Gross revenue				
Ses	2	Cash prizes				
Direct Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
	5	Other direct expenses .				
	6	Volunteer labor	☐ Yes% ☐ No	☐ Yes% ☐ No	☐ Yes% ☐ No	
	7	Direct expense summary Ac	dd lines 2 through 5 in c	olumn (d)		
	8	Net gaming income summar	y. Subtract line 7 from l	ine 1, column (d)		
9	a Is	nter the state(s) in which the or the organization licensed to c "No," explain:	=	s in each of these states		🗌 Yes 🗌 No
10		/ere any of the organization's c "Yes," explain:	gaming licenses revoked	·	-	

SCHEDULE 1 (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

2014

OMB No 1545-0047

Open to Public Inspection

Employer identification number 35-0410458 ► Attach to Form 990.

Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Part I General Information on Grants and Assistance Indiana Mineral Aggregates Association, Inc. Department of the Treasury Internal Revenue Service Name of the organization

-	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?	in records to subs	tantiate the amou	nt of the grants or	assistance, the g	rantees' eligibility for	or the grants or assistance	e, and
8	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	zation's procedure	es for monitoring t	he use of grant fur	nds in the United	States.		
Part II	L	sistance to Dor	nestic Organiz	ations and Dom	estic Governm	i ents. Complete if	the organization answ	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" to Form 990,
	Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	y recipient that r	eceived more th	an \$5,000. Part	ll can be duplica	ated if additional s	space is needed.	
1 (a) h	1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Bu	(1) Build Indiana Council							
One N C	One N Capitol #1005 Indpls, IN	37-1720634	501-c-6	159,000				See Part IV
(2)								
(3)								
æ								
<u> </u>								
(9)								
۵								
(8)								
6								
(10)								
(11)								
(12)								
3 8	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table	501(c)(3) and goverganizations listed	ernment organizat in the line 1 table	ions listed in the li	ne 1 table			A A
For Pap	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instructions	for Form 990.		Ö	Cat No 50055P		Schedule I (Form 990) (2014)

Schedule I (Fc	Schedule I (Form 990) (2014)					Page 2
Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.	mestic Individua space is needed.	Is. Complete if the	organization answ	ered "Yes" to Form 990,	
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
-						
7						
ო						
4						
5						
9						
7						
Part IV	Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	he information re	quired in Part I, lin	e 2, Part III, column	(b), and any other additi	onal information.
The purpos	The purpose of the grant to Build Indiana Council is to promote the industry and educate the public regarding the importance of maintaining and improving the infrastructure.	omote the industry a	nd educate the public	regarding the imports	nce of maintaining and impro	ving the infrastructure.
The Indiana	The Indiana Mineral Aggregates Association monitors the use of		hrough its active part	icipation on the Board	grant funds through its active participation on the Board of Directors of the Build Indiana Council. There are three	ana Council. There are three
IMAA board	IMAA board members on the Build Indiana Council board (one of	one of which is a vo	oting member) as well	which is a voting member) as well as a staff representative.	ve.	
						Schedule I (Form 990) (2014)

SCHEDULE J (Form 990)

Compensation Information
For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees

OMB No 1545-0047 2014

35-0410458

► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990. Open to Public Inspection ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service

Indiana Mineral Aggregates Association, Inc.

Employer identification number Name of the organization

rart	Questions Regarding Compensation			•	
1a		rovided any of the following to or for a person listed in Form provide any relevant information regarding these items.		Yes	No
	First-class or charter travel	☐ Housing allowance or residence for personal use ☐ Payments for business use of personal residence			
	☐ Travel for companions ☐ Tax indemnification and gross-up payments	Health or social club dues or initiation fees			
	☐ Discretionary spending account	Personal services (e.g., maid, chauffeur, chef)			
	Discretionary spending account	Fersonal services (e.g., maid, chauneur, cher)			
b	or reimbursement or provision of all of the ex	the organization follow a written policy regarding payment kepenses described above? If "No," complete Part III to	1ь		:
2		or to reimbursing or allowing expenses incurred by all EO/Executive Director, regarding the items checked in line	2		
3	organization's CEO/Executive Director. Check all t	ganization used to establish the compensation of the that apply. Do not check any boxes for methods used by a the CEO/Executive Director, but explain in Part III.			,
	☐ Compensation committee	✓ Written employment contract			ĺ
	☐ Independent compensation consultant	✓ Compensation survey or study			
	☐ Form 990 of other organizations	☑ Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990 organization or a related organization:	, Part VII, Section A, line 1a, with respect to the filing			
а	Receive a severance payment or change-of-control	ol pavment?	4a		
b	· · · · · · · · · · · · · · · · · · ·	nental nonqualified retirement plan?	4b		
C		based compensation arrangement?	4c		
	If "Yes" to any of lines 4a-c, list the persons and p	provide the applicable amounts for each item in Part III.			
_	Only section 501(c)(3), 501(c)(4), and 501(c)(29)				
5	For persons listed in Form 990, Part VII, Section A	a, line 1a, did the organization pay or accrue any			
	compensation contingent on the revenues of:				
a	-	· · · · · · · · · · · · · · · · · · ·	5a	-	-
b	,		5b		
	If "Yes" to line 5a or 5b, describe in Part III.				
6	For persons listed in Form 990, Part VII, Section A compensation contingent on the net earnings of.	, line 1a, did the organization pay or accrue any			
а	The organization?		6a		l
b	Any related organization?		6b	-	
	If "Yes" to line 6a or 6b, describe in Part III.				
7		on A, line 1a, did the organization provide any non-fixed describe in Part III	7		
8		paid or accrued pursuant to a contract that was subject			
		Regulations section 53.4958-4(a)(3)? If "Yes," describe			1
	ın Part III		8		
_	16 40 C - 11 L - 11 - 1 - 1 - 1 - 1 - 1 - 1 - 1	Office of the control of the first of the control o			
9	If "Yes" to line 8, did the organization also to Regulations section 53.4958-6(c)?	bllow the rebuttable presumption procedure described in	۵		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII. Note. The sum of columns (B)(I)—(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of	(B) Breakdown of W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement and	(O) Nontaxable		(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable	other deferred compensation	benefits	(a)-(i)(a)	ın column (B) reported as deferred ın prior Form 990
				rombelledino.				
	ε	141,000	000'L	4,392	4,230	17,315	173,937	
1 Robert Jones, Executive Director	€							
	_							
Q	€	5 4 4 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9						
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13	E							
	(8)							
14	Ξ							
	8							
15	Ξ							
	8							
16	(E)							

Schedule J (Form 990) 2014

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.
► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Employer identification number

Indiana Mineral Aggregates Association, Inc.	35-0410458
Part VI Line 11-The tax return is reviewed first by the Executive Director. Once reviewed,	
all officers and board members are provided a copy of the tax return prior to the return being filed.	
The copy provided to the board members and directors excludes Schedule B, due to the sensitive nature of the information.	
Part VI Line 12-The conflict of interest policy has been communicated to all board members and emplo	yees. Any
possible conflicts are to be disclosed to other board members and made a matter of record.	
	·
Part VI Line 15-The process for determining the compensation of the Executive Director	
of the Indiana Mineral Aggregates Association, Inc. contains the following elements:	
Review and approval-The compensation of the Executive Director is reviewed and approved by the Exe	cutive Committee
of the board of directors, provided that persons with conflicts of interest with respect to the issue are r	not involved.
Use of comparable data-The Executive Director's compensation is reviewed and approved using comparable	
data for similarly qualified persons in similar organizations.	
Contemporaneous documentation and recordkeeping-There is contemporaneous documentation and	
recordkeeping with respect to the deliberations and decisions regarding the compensation agreement.	
The compensation agreement is expressed in the form of a contract.	
······	
Part VI Line 19-The association's governing documents, conflict of interest policy and tax return are av	ailable
for review upon request at the association's office during normal business hours.	
	<u></u>